FORM A. PROPERTY OWNER AUTHORIZATION TO APPLICANT

I, the undersigned, being first duly sworn, depose and say that I am the owner of the property described and which is the subject matter of the proposed hearing. I give authorization for		
STATE OF <u>Florida</u> , COUNTY OF <u>Charlotte</u>		
The foregoing instrument was acknowledged before me this 23 day of 40 , 2012, by		
who is personally known to me or has/have produced		
as identification and who did/did not take an oath. Chery Public Signature Notary Public Signature Notary Printed Signature Printed Signature of Owner Printed Signature of Owner		
Administrative Ssistant 47320 BERMONT ROAD Title Address		
Commission Code PUNTA GORDA, FL 33982 City, State, Zip		
941-639-2518 Telephone Number		

Notary Public - State of Florida My Comm. Expires Mar 21, 2016 Commission # EE 181724 Community Development Department Comprehensive Planning Section Room 205 18500 Murdock Circle Port Charlotte, FL, 33948

FORM B. APPLICANT AUTHORIZATION TO AGENT

	depose and say that I am the applicant for the REZONING	
of the property described and which is the s	ubject matter of the proposed hearing.	
I give authorization for	to be my agent for this	
application.		
STATE OF Florida, COUNTY OF Charlotte		
The foregoing instrument was acknowledged before me this 30 day of 12, by		
who is personally known to me or has/have	produced	
as identification and who did/did not take a	n oath.	
Choul Disalus	Calusa Green, LLO	
Notary Public Signature	Signature of Applicant Managing Member	
Charyl Pisatura	Bruce Laishley	
Notary Printed Signature	Printed Signature of Applicant	
Administrative Assistant	1801 Shreve Street - Suite 113	
Title	Address	
FE 181724	Punta Goda, FL 33950	
Commission Code	City, State, Zip	
	941.637.9655	
CHERYL PISATURO Notary Public - State of Florida My Comm. Expires Mar 21, 2016 Commission # EE 181724	Telephone Number	